PTO/SBR6 (61-59)
Approved for use through 12/31/2008, OMB 0655-0005
U.S. Patient and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Propervork Reduction Act of 1995, no persons are required to respond to excledi POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).										
I hereby app	oint:									
X Practiti	25096 oners are to be named, then a customer number must be used):									
Name			Registratio Number	Registration Number		Name				ration
any and all pater	nt applica	to represent the undersign lone assigned gold to the	undersigned :	o United	d States Pate	int and Trac PTO assign	Semark O	office (USPTO) in connection	with
attached to this form in accordance with 37 CFR 3.73(b).										
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3,73(b) to:										
x The address associated with Custom			er Number:	Number: 250		6				
OR										
Firm or Individual Name										
Address										
City			State	State						
Country	ountry		Teleph	Telephone						
Assignee Name and Address: Eqapez Foundation, L.L.C. 180 Greentree Drive, Sulle 101 Dover, DE 19904										
A copy of this form, together with a statement under 37 CFR 3.73(b) [Form PTO/SB/B6 or equivalent] is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioner appointed in this form if the appointed practitioner is suthorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled.										
SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to ect on behalf of the assignee										
Signature	set in					Date 08/27/08				
Name	Jeremiah Miller				-	Telephone				
Title	Autho	rized Person								
				-						